FORM D

1412737

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB A	PPROVAL
	3235-0076 April 30, 2008 e burden
hours per form	16.00
SEC U	SE ONLY
Prefix	Serial
DATE R	ECEIVED
l	l

Name of Offering (check if this is an amendment and name has changed, and indicate change.)									
Issuance of Limited	Liability Company inter	ests of Sand Spring	Capital III Master F	fund, LLC					
Filing Under (Check	box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	☐ Sec	βοή.4(6):Ι νειဩ'Ù	ĽOE		
Type of Filing:	☐ New Filing				F	A.	No.		
		A. BASI	C IDENTIFICAT	ION DATA	()	CT 1 7 200	7 />		
1. Enter the inform	nation requested about the	issuer			VE)		M		
Name of Issuer	check if this is an am	endment and name	has changed, and in	dicate change.	N.	186			
Sand Spring Capita	I III Master Fund, LLC	•			·				
Address of Executive	e Offices		(Number and Stree	et, City, State, Zip C	ode) Tele	ephone Number (I	ncluding Area Code)		
c/o Sand Spring Ma	inagement, LLC, 247 Flor	rida Street, Baton R	ouge, Louislana 70	821	(22	5)343 -9 342			
Address of Principal	Offices		(Number and Stree	et, City, State, Zip C	ode) Tele	ephone Number (1	OCESSED		
(if different from Exec	cutive Offices)					PH	(OCE22ED		
Brief Description of E	Business: private inv	estment company					OT 9 1 9667		
						U	CT 2 4 2007		
Type of Business Or	ganization						THOMSON		
į	corporation	☐ limited	partnership, already	formed	other	(please spec ify)	FINANCIAL		
	☐ business trust	limited	partnership, to be for	med	Limited I	Liability Compan	y, already formed		
			Month	Yea	ar				
Actual or Estimated I	Date of Incorporation or Or	ganization:	0 8	0	7	🖾 Actual	☐ Estimated		
Jurisdiction of Incorp	oration or Organization: (I	Enter two-letter U.S.	Postal Service Abbre	eviation for State;			_		
		C	N for Canada; FN fo	r other foreign jurise	diction)	D E			

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of Information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC II	DENTIFICATION DATA	A							
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partnership issuers; and Each general and managing partner of partnership issuers. 											
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Managing Member						
Full Name (Last name first, i	f individual):	Sand Spring Manage	ement, LLC								
Business or Residence Addi	ess (Number and	Street, City, State, Zip Coo	de): 247 Florida Street	, Baton Rouge, L	ouisiana 70821						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner						
Full Name (Last name first, i	f individual):	Morales, Walter A.		1							
Business or Residence Adda Louislana 70821	ess (Number and	Street, City, State, Zip Coo	de): c/o Sand Spring M	anagement, LLC	, 247 Florida Street, Baton Rouge,						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner						
Full Name (Last name first, i	f individual):	Miller, Kevin S.									
Business or Residence Adda Louisiana 70821	ess (Number and	Street, City, State, Zip Coo	de): c/o Sand Spring M	anagement, LLC	, 247 Florida Street, Baton Rouge,						
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner						
Full Name (Last name first, i	f individual):	Sand Spring Capital	III, LLC		,						
Business or Residence Addi Loulsiana 70821	ess (Number and	Street, City, State, Zip Coo	le): c/o Sand Spring M	anagement, LLC	, 247 Florida Street, Baton Rouge,						
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner						
Full Name (Last name first, i	f individual):	Sand Spring Capital	III, Ltd.	· · · · · · · · · · · · · · · · · · ·							
Business or Residence Addr Louislana 70821	ess (Number and	Street, City, State, Zip Coo	le): c/o Sand Spring M	anagement, LLC	, 247 Florida Street, Baton Rouge,						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner						
Full Name (Last name first, i	f individual):										
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de):								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, i	f individual):			-							
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	le):								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner						
Full Name (Last name first, i	findividual):										
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	le):								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	B. INFORMATION ABOUT OFFERING													
1.	Has th	he issue	r sold, or o	loes the is	suer inten			edited inve cendix, Co				••••••	☐ Yes	⊠ No
2.	What	is the m	inimum in	vestment t	hat will be	accepted	from any i	ndividual?	******************			\$ <u>1,0</u>	000,000 initi	lal*, \$250,000* additional
											* may	be waived	l at managi	ng member discretion
3.						_							☐ Yes	i ⊠ No
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full	Name	(Last na	me first, if	individual)									
Bus	iness c	or Reside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip	Code)		-				
	ne of A	esociate	d Broker o	or Dealer					·					
				n Deale,										
Stat						tends to S		hasers						☐ All States
	•					,		☐ [DE]				[HI]	[OI]	Li Ali Otates
	IL) [□ (IN)	□ [IA]	☐ [KS]	□ [KY]	□ [LA]	☐ [ME]	[MD]	☐ (MA)	[MI]	[MN]	☐ [MS]	☐ (MO)	
	мт) [□ [NE]	[NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	☐ [NC]	□ [ND]	□ (OH)	□ [OK]	□ [OR]	□ [PA]	
	RI] [□ [SC]	[SD]	□ [TN]	□ [TX]	[TU]	[VT]	□ [VA]	□ [WA]		□ [WI]	□ (WY)	□ (PR)	
Full	Name	(Last na	me first, if	individual)			<u> </u>						_
Bus	iness c	or Reside	ence Addre	ess (Numt	er and Str	eet, City, S	State, Zip	Code)						
Nan	ne of A	ssociate	d Broker o	or Dealer		-					130, 25. 0			
Stat						tends to Se		hasers						☐ All States
						•		□ (DE)				☐ (HI)	☐ [ID]	LI All Olates
	IL] [□ [IN]	□ [iA]	□ [KS]	□ [KY]		☐ [ME]	[MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
	мт] [□ [NE]	□ [NV]	□ (NH)	□ (NJ)	[MM]	□ [NY]	□ [NC]	[ND]	□ [OH]	□ [OK]	□ [OR]	☐ [PA]	
□ (RI] [□ [SC]	□ [SD]	[NT]	□ (тх)	[TU]	□ (VT)	□ [VA]	□ [WA]	[M∧]	[WI]		[PR]	
Full	Name	(Last na	me first, if	individual)									
Bus	iness o	or Reside	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip	Code)						
Nan	ne of A	ssociate	d Broker o	or Dealer										
Stat						tends to Se		nasers						☐ All States
			□ [AZ]			.,		□ [DE]			☐ [GA]	[HI]	[ID]	
	IL) [[IN]	□ [IA]	[KS]	□ [KY]	[LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	[MN]	☐ [MS]	[MO]	
	мт] [□ [NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	☐ [NC]	☐ [ND]	□ [OH]			□ [PA]	
	RI] [□ [SC]	□ [SD]	□ [TN]	□ [ТХ]	[UT]	[VT]	□ [VA]	[WA]		[WI]		□ [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and				
	already exchanged. Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	. \$	0	\$	0
	Equity			. <u> </u>	0
	_	<u>4</u>			<u></u>
	☐ Common ☐ Preferred	_	_	_	_
	Convertible Securities (including warrants)			<u> </u>	0
	Partnership Interests			<u>\$</u>	0_
	Other (Specify) Limited Liability Company Interests)	<u>\$</u>	100,000,000	<u>\$</u>	133,500,000
	Total	<u>s</u>	100,000,000	<u> </u>	133,500,000
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
			Number Investors		Dollar Amount of Purchases
	Accredited Investors		2	<u>\$</u>	133,500,000
	Non-accredited Investors		N/A	<u>\$</u>	N/A
	Total (for filings under Rule 504 only)		0	<u>\$</u>	0
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.		Types of		Dollar Amount
	Type of Offering		Security		Sold
	Rule 505		N/A	<u>\$</u>	N/A
	Regulation A		N/A	<u>\$</u>	N/A
	Rule 504		N/A	<u>\$</u>	N/A
	Total		N/A	\$	N/A
4.	 a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 				
	Transfer Agent's Fees		🗆	\$	0
	Printing and Engraving Costs		🗆	\$	0
	Legal Fees		🛛	\$	3,822
	Accounting Fees		🗆	\$	0
	Engineering Fees		🗆	\$	0
	Sales Commissions (specify finders' fees separately)		🗆	\$	0
	Other Expenses (identify)			s	0
	Total			\$	3,822
		-	_		<u> </u>

	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPI	ENSES	AND USE	OF PRO	CEEDS	5	
4	b. Enter the difference between the aggregate offering Question 1 and total expenses fumished in response to "adjusted gross proceeds to the issuer."	Part C-Question 4.a. This differe	nce is the	е		<u>\$</u>	99,996	,178
5	Indicate below the amount of the adjusted gross proceed used for each of the purposes shown. If the amount for estimate and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set forth in res	any purpose is not known, fumish he total of the payments listed mu	an ıst equal	Offi Direc	ents to cers, ctors & iates			nents to hers
	Salaries and fees			\$	0		\$	0
	Purchase of real estate			\$	0		<u>\$</u>	0
	Purchase, rental or leasing and installation of ma	chinery and equipment		\$	00		\$	0_
	Construction or leasing of plant buildings and fac	ilities		\$			\$	00
	Acquisition of other businesses (including the val offering that may be used in exchange for the ass pursuant to a merger	sets or securities of another issue		\$	0		\$	0
	Repayment of indebtedness			\$	0		\$	0
	Working capital			\$	0	Ø	\$99,9	96,178
	Other (specify):			\$	0		\$	0
				\$	0		\$	0
	Column Totals			\$	0	⊠	\$99,9	96,178
	Total payments Listed (column totals added)		_				6,178	
		D. FEDERAL SIGNATUI	RE					
CO	nis issuer has duly caused this notice to be signed by the unstitutes an undertaking by the issuer to furnish to the U.S the issuer to any non-accredited investor pursuant to para	Securities and Exchange Comm	on. If this	notice is filed pon written rec	under Rule quest of its s	505, the	e following s information	ignature n furnished
	suer (Print or Type) and Spring Capital III Master Fund, LLC	Signature Colle	1	Take	Da	ite Oct	tober l	6,2007
Na	ame of Signer (Print or Type)	Title of Signer (Print or Type)						
W	alter A. Morales	Managing Member of Sand S Capital III Master Fund, LLC	pring Ma	inagement, LL	.C, Managir	ng Mem	ber of San	d Spring
							-	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 pres provisions of such rule?	ently subject to any of the disqualification	Yes ⊠ No						
	See A	Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.								
3.	The undersigned issuer hereby undertakes to	furnish to the state administrators, upon written request, information	furnished by the issuer to offerees.						
4.		uer is familiar with the conditions that must be satisfied to be entitle ptice is filed and understands that the issuer claiming the availability a satisfied.							
	suer has read this notification and knows the contrized person.	ents to be true and has duly caused this notice to be signed on its b	ehalf by the undersigned duly						
	(Print or Type) Spring Capital III Master Fund, LLC	Signature Mallo a mars	Date October 16,2007						
Name	of Signer (Print or Type)	Title of Signer (Print or Type)							

Managing Member of Sand Spring Management, LLC, Managing Member of Sand Spring Ca

Instruction:

Walter A. Morales

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				API	PENDIX					
								1		
1	Intend to non-ad investors (Part B -	to sell ccredited in State	3 Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of in	4 avestor and hased in State – Itern 2)		Disqualification under State ULOE (if yes, attach explanation of waiver granted)		
State	Yes	No	Limited Liability Company interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA										
со										
СТ										
DE				·				<u></u>		
DC								<u> </u>		
FL		·		·						
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NH										
NJ										
NM										

				АР	PENDIX				
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1	2	2	3			4		5	
	to non-ac investors		Type of security and aggregate offering price offered in state (Part C – Item 1)		Disqualificat under State U (if yes, atta explanation waiver grant (Part E – Iter				
State	Yes	No	Limited Liability Company Interests	Number of Accredited Investors	Accredited Non-Accredited				
NY				i					
NC									
ND				·			· · · · · · · · · · · · · · · · · · ·		
ОН			· · · · · · ·						
ок									
OR									
PA									
RI									
sc									
SD				·					
TN	İ								
тх		Х	\$100,000,000	2	\$133,500,000	0	\$0		X
UT					<u> </u>				
VT									
VA									
WA									
WV									
WI									
WY							·		
PR					<u></u>				<u> </u>

